

NC Mental Health Planning and Advisory Council
Meeting Minutes of May 3, 2013
Final - Approved
10:30 a.m. – 3:30 p.m.
630 Palmer Drive, Taylor Building, Dorothea Dix Campus, Raleigh, NC

Present: Marc Jacques, Kent Earnhardt, Vicki Smith, Eva Eastwood, Bruce Spangler, Damie Jackson-Diop, Gail Cormier, Gina Price, Mary Edwards, Dick Brunstetter, Mary Lloyd (phone), Mary Recca Todd, Martin Pharr, Terri Shelton (phone), Danielle McConaga, John Sullivan.

Guests: Pam Chevalier, Pat McGinnis (phone), Martha Brock (phone), Brenda Piper (phone), Bill Stanley (phone)

Staff: Walt Caison, Maria Fernandez, Susan Robinson

- The meeting was convened. Introductions and welcomes were exchanged.
- The minutes were reviewed and approved as amended.
- The proposed agenda was reviewed with minor changes in the order of items to be discussed.
- The 2013 meeting dates and tentative focus and outcomes of the meetings were reviewed and approved. It was determined that an additional meeting to work on drafting the plan was needed. After discussion, by consensus, the next meeting will occur on Thursday, May 30, as it would work as a better meeting date than Friday, May 31.
- The Council will meet on the following dates.
 - Thurs, May 30 - work on SFY 2014-15 Plan for posting for public review & comment; youth/young adults in transition speaking about their goals, experience accessing services, completing school, barriers accessing VR due to substance use disorders
 - Fri, August 2 - final work on SFY 2014-15 Plan & work on SFY2012-13 Report -
 - Fri, November 1 - work on SFY2012-13 Report for submission Dec 1
- Susan Robinson reviewed the SFY MHBG Plan elements, outline and changes in format, requirements and timelines for the MHBG Plan and Report. NC DMHDDSAS is still responsible for reporting on the statutory requirements (5 criteria) that can be seen woven into the draft plan in each section. References appear for each criteria where relevant. Susan reviewed the Draft plan sections I and II (handouts) with the Council; edits were received and added. Members stated that: the plan sections is well written, helpful and clearly outlined historical context as well as the current structure and system; the text is easy to follow and is helpful to have all this information in one place. Susan referred to the summary of the National Outcome Measures and state performance measures (reverse of agenda) so these can be easily referred to during the next work on the priorities and strategies.
- Maria Fernandez reviewed the SFY 2014-15 Table 1 Plan Priorities, Strategies, Measures, Targets. Edits were made to the wording of the objectives. Strategies were added to the first two priorities. Marc requested members submit additional comments and edits to Susan or Ging prior to the next meeting. The next meeting on Thursday, May 30, will focus almost totally

on working on this section of the plan, as well as expenditures and setting priorities for future plan expenditures.

Handouts included: Draft Plan Sections I & II: Table 1 Summary 2014, 2015 and Table 1 Priorities, Strategies & Performance Indicators for the afternoon.

Discussion and considerations during work on the plan included the following:

- There are a lot of changes in funding occurring in the system. How and when do we as a Council make decisions about funding.
- Vicki offered a reminder that the Division Director of Medical Assistance (Medicaid,) Carol Steckel, is holding regional public forums regarding the recently announced Governor's initiative Partnership for North Carolina that will integrate MHDDSA services with primary health care services in CCEs – Comprehensive Care Entities. People were encouraged to attend, learn more and ask questions.
- The definition of homeless was discussed both by how SAMHSA defines homeless as well as McKinney Vento Act for PATH funding and for school services through the NC Department of Public Instruction. There is a point in time survey that is completed as well. (INSERT link). McKinney Vento defines homeless for school children and provides homeless coordinators in schools. The National TA Center for these services is located in Greensboro and is affiliated with UNC-Greensboro where Terri Shelton is a leader and faculty.

Additional review and edits will be provided by members to staff and the Council will continue to work on this Table on May 30th in order to complete it.

- **DOJ Agreement Settlement Update & DHHS Adult Initiatives Update**
Walt Caison, Best Practice Team Leader, Community Policy Management Section, provided an update on the progress, the process and the services, supports and next steps before the end of June 30 as well as the work to be done in the next state fiscal year per the working agreement.

Discussion and questions addressed the following:

- Ways in which consumer/family choice is supported or promoted in the process.
- Ways in which people who live in another county from which they have been deemed Medicaid eligible or county of origin will be able to access services and care seamlessly and not be denied because counties are not working across the boundaries.
- The high number of ACT Teams in NC in comparison to other states with similar population and geographic distribution and ways in which fidelity is maintained to the EBP model, quality indicators and effective outcomes for consumers or beneficiaries is achieved. Currently there

are 32 ACT teams meeting fidelity in the state; 100 teams exist in the state and this is more than NYS has with a larger population.

- It was noted that occupancy rate for adult care homes is quite low now, far less than it used to be.
- DRNC continues to monitor adult care homes as ongoing issue for health and safety concerns.
- Ways in which diversion is happening and how older adults who do not choose to live in this way with lower rates are supported in this process.

▪ **Bring Kids Back Home and PRTF updates**

Walt provided an update on the use of out-of-state treatment settings for youth and children, often still occurring without the LME-MCO having knowledge of this treatment placing until authorization is requested. There has been a reduced number of out of home – in out-of-state or beyond 40 mile radius of state line. Approximately, 238, with a total of 636 in out-of-home treatment placements in total. This is progress.

Work is being done to address concerns with implementing the Intensive In-Home service definition, in particular the types of EBPs that can be implemented through the definition as it is written using the team practice model as well as better articulating the outcomes. Partner agencies, families and other stakeholders are working on this with the DMHDDSAS. A work group will meet later in May for this.

Council asked if MST was having better outcomes with less cost. MST is seen as a more wholistic service for families and children in the home.

When it becomes possible to do so, the Therapeutic Foster Care definition, is revised and will promote best practices within the new definition - Therapeutic Family Services. This will help reduce the higher end treatment settings from becoming the default by which some children are treated.

Walt described the Bring NC Kids Back Home initiative as an overarching way to target better practice and outcomes when a PRTF is seen as medically necessary.

- It was noted that the initiative name was confusing and didn't convey the intent of the effort at all. Bring Kids Back Home to what and why and how is missing from the name.

Length of stay in PRTFs was onward to a year or more; interface with parents and kids was driven by the interface with the schools.

It was noted that DPI is in the process of leadership changes and will identify their representative to the Council in the next few weeks.

Disability Rights NC Updates

Vicki Smith indicated their federal funding from SAMHSA for PAIMI continues at this time, though sequester will definitely impact this effort. Updates on law suits and complaints filed with public schools, with DOJ; with employment discrimination cases where individuals have disabilities; a suit in in process related to group homes and adult care homes under Olmstead which is pending; issues remain with children/youth who are in out of home treatment settings, especially out of state in which the schools interpret they have no responsibility for ensuring educational needs are met and are transportable with credits to their home school/local education agency to meet academic requirements.

Each of these actions have significant impact on the state and on the consumers and families/children/youth in communities either named or covered under the legal issue in questions.

Legislation has been introduced that names DPI responsible with state board of education for determining how to fund educational services beyond head count rather than adjusting insert Bill # Vicki was asked how Council can help or what action was needed. Vicki indicated time would tell and she would be sure let the Council know what was needed if the bill didn't go through.

There are funds remaining from the DOJ Agreement that will need to be spent on community-based services to meet the rulings made thus far; these are seen as a short term fix. The appeals process is individually done – appeals require of maintenance of service and the volume of service.

▪ NC MH Consumers Organization Update and Progress

Bruce Spangler provided an overview of the NC MH Consumers Organization, their work to date, outcomes and what their next steps in completing scope of work and planning for next year. Bruce indicated that the organization, now with 720 members, began as a spin off from NAMI NC to reduce the influence from family members that challenged some adult consumers. This was done in order to strengthen the adult consumer's voice.

Bruce provided a list of the accomplishments and upcoming events as well as trainings that have been held or will be held prior to June 30th. Kent and others offered support for the regional meeting and the support groups that focus on recovery and consumer interest to that end. Members participate on speaker's bureaus. Suicide prevention and mental health first aid training has been offered during the year.

Bruce also announced that Eva has been notified she will be given an award from the National NAMI office in Advocacy, She is currently raising funds to travel to Texas in June to receive this auspicious award. Eva noted that Marc Jacques and several before Marc and Eva have been awarded the privilege of this award in the past few years. Members congratulated Eva. Donations

to provide support for Eva's travel to this event can be sent to NCMHCO Attn: Eva Eastwood NAMI Advocacy Award.

▪ **NC Housing Finance Agency –NCHFA Update**

Mary Rea Todd distributed the annual report for the NCHFA – funded thru housing trust fund.

Supportive housing – housing that has supports associated with the housing unit. An example offered is the Moore bldg. in Charlotte 85 diff unite, rental assistance, locked own unit.

NC CANSO

Laurie Coker presented an overview of NC CANSO and indicated she and members of their board were looking for funding assistance to support some of their priorities and efforts. Susan and Ging, with Marc, indicated that the Planning Council serves in an advisory role to the division and make recommendations and set priorities for the division to consider funding. The final decision rests with the division of MHDDSAS how funds will be allocated. The Council makes recommendations to the division, evaluates expenditures. During the next meeting as part of working on the draft plan, the Council will look at expenditures and propose recommendations for priorities for spending funds in the next two years to meet plan and state goals.

Discussions & Questions:

- What funds does NCCANSO receive?
- What are initiatives where this work might be connected?
- How does this fit with the Employment First to strengthen initiative and the TA, education and support to be effective (other states have this in place through a support)?
- How does CANSO's proposed trainings fit with current proposals and initiatives?
- Suggestion to see how this fits under the umbrella of robust statewide TA initiative that includes what Charene in Charlotte is doing and what Laurie is proposing – in particular, for young adults/youth – how to prepare youth to engage and make progress in their life.
- Training for peer support spec will be training in August 2013

Recovery conference – peer supports might specialize, increase standards, support liability,

NC Families United and NC Youth MOVE had limited time on the agenda and will provide more detailed information to the Council on May 30th. Damie had a video for the Council to view, though the transmission through the internet connection was not successful. This information will be offered in a different format at the next meeting.

Marc reminded all that NAMI WALKs – Saturday, May 4th here on the Dix campus – all are welcome. The meeting was adjourned at 3:50 due to the very full agenda and lively discussions. Marc offered a reminder that the next meeting is Thursday, May 30, 2013 same time and location as today's meeting.